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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZA	ATION		
1 Ollin 1	(See instruction	ons)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
JOEPAC				
ADDRESS (number and	street) 62 Paradise Lane			
(Check if address is changed)	s			
	Ronks		PA L	17572
		CITY	STATE▲	ZIP CODE 🛦
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-	-mail address)		
(Check if address X is changed)	s kwoodjacobs@aol.c	com 		
(Check if address is changed)	PAGE ADDRESS (URL) s LIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			
2. DATE M 0 3	D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	ATION NUMBER	C C00402172		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and to the best of my kno	owledge and belief it is true, corre	ct and complete	
	Treasurer Katherine Wood	l- lacobe		
Type or Print Name of	reasurer			
Signature of Treasure	Electronically Filed by Katherine	e Wood-Jacobs	Date 03	25 2009
NOTE: Submission of fa	llse, erroneous, or incomplete information ma	ay subject the person signing this	·	-
Office Use Only		For further informat Federal Election Com Toll Free 800-424-95	mission	FEC FORM 1 (Revised 02/2009)